

**Bulletin:** Updates on Maryland's COVID-19 Vaccine Plan (Week 26 Allocation)

To: All COVID-19 Vaccine Providers Registered in ImmuNet, including but not limited

to Hospitals, Federally Qualified Health Centers (FQHC), and Local Health

Departments

From: Bryan Mroz, Assistant Secretary, Maryland Department of Health (MDH)

Date: June 04, 2021

- Please review the latest <u>Vaccination Matters Order (03/22/2021)</u>. We encourage every provider to make use of every resource to ensure a successful vaccination campaign.
- All COVID-19 vaccine providers are required to administer COVID-19 vaccine according to the following updated guidance.
- This document updates and supersedes the COVID-19 vaccine bulletin (Week 25), dated May 28, 2021 and earlier bulletins.

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### **Updates & Reminders**

• REMINDER: All COVID-19 vaccine providers shall continue to prioritize Marylanders who are 65 and older.

All local jurisdictions are reminded that homebound seniors should receive priority for vaccines. Jurisdictions should provide up-to-date information on local needs each week in order to receive extra doses for homebound populations using the spreadsheets provided by MDH.

• As access to COVID-19 vaccine increases, it is important for providers not to miss any opportunity to vaccinate every eligible person who presents at vaccine clinics. Please see Section 6 and Appendix 4 for further details.

# • Vaccine Updates:

- Local Health Departments: Please see the four-week projection of vaccine allocation to all local health departments (Appendix 1, attached).
- All new vials allocated of Moderna, starting May 28, 2021, will be the larger dose vials. Providers should check the vials received and in their inventory to document which size vials they have.

### • Provider Updates:

 As of Thursday, May 13, 2021, Maryland expanded vaccine eligibility to all Marylanders aged 12 and older.

Please note: Those aged 12 to 17 are **only eligible to receive the Pfizer-BioNTech COVID-19 vaccine** based on the amended Emergency Use Authorization to expand its use in adolescents 12 to 15 years of age. Please see the <u>FDA</u> and <u>CDC</u> statements for more information.

MDH strongly supports use of the Pfizer-BioNTech vaccine in adolescents 12 to 15 years of age, and encourages providers to make appointments available to this population immediately. **Providers should develop their own procedures for handling parental consent of these populations.** 

MDH has an available supply of J&J doses for transfer to interested providers.
 Please contact MDH to request doses through mdh.covidvax@maryland.gov.

# 1. Vaccine Eligibility

• All Marylanders 12 and older are now eligible to receive a COVID-19 vaccine. All COVID-19 vaccine providers shall continue to prioritize Marylanders who are 65 and older.

**Note:** Please see Appendix 5 for the full list of Maryland's Vaccine Eligibility Phases.

# 2. Residency and Priority Group Eligibility Determinations

- All COVID-19 vaccine providers shall take reasonable steps to determine if an individual qualifies under the eligible priority groups. A COVID-19 vaccine provider may require additional documentation or employee identification and may require that organizations submit institutional plans with identified individuals. Any requirements must be applied consistently to all individuals with an appointment.
- A COVID-19 vaccine provider may not refuse an individual a vaccine based on their citizenship or immigration status.
- We prefer that Marylanders are prioritized for getting a vaccine allocated to us by the federal government; however, Maryland will not turn away a person from out of state who needs a vaccine.
- Non-discrimination: The Maryland Department of Health complies with applicable Federal and State civil rights laws and prohibits discrimination on the basis of race, color, religion or creed, sex, age, ancestry or national origin, marital status, physical or mental disability, sexual orientation and gender identity, genetic information, socioeconomic status, and/or any other protected status. The Maryland Department of Health prohibits the exclusion and favorable/unfavorable treatment of any individual in the aforementioned protected categories based on an individual's medical knowledge of and/or experience with a vaccine's efficacy, longevity, reduced side effects, or any other characteristic associated with the performance of an administered COVID-19 vaccination. An individual's protected status shall have no bearing on the type of vaccine an individual receives.

### 3. Vaccine Operations

• All COVID-19 Vaccine Providers shall: Register in ImmuNet to potentially be allocated a vaccine at:

https://phpa.health.maryland.gov/OIDEOR/IMMUN/Pages/quick\_ref\_guides.aspx

**NOTE:** Registration does not guarantee the immediate allocation of the vaccine. Allocation is dependent on vaccine supply.

- All COVID-19 vaccine providers shall submit allocation requests to MDH by 2:00 p.m. every Tuesday at mdh.covidvax@maryland.gov. Requests from providers who have not administered at least seventy-five percent (75%) of all of their total dose allocation received to date will not be prioritized in the subsequent week's allocation. Because vaccine doses are still severely limited, MDH cannot guarantee that requests will be granted under any circumstances.
- Pfizer: Per updated <u>federal guidance</u>, all vials of Pfizer contain 6 vaccine doses.
   Providers that are unable to get a sixth dose from each vial will need to report the sixth dose as wastage using the process outlined in Section 4, Wastage. Additional Pfizer details can be found here:
   <a href="https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/index.html">https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/index.html</a>
- Moderna: Per updated federal guidance, Moderna will only ship vials containing the larger 15 vaccine doses (but are indicated as 14 dose vials). Providers should note the vial size of the vials they have in their inventory before administering doses. Requests will be filled in installments of 140. Additional Moderna details can be found here: <a href="https://www.cdc.gov/vaccines/covid-19/info-by-product/moderna/index.html">https://www.cdc.gov/vaccines/covid-19/info-by-product/moderna/index.html</a>

### • Johnson & Johnson COVID-19 Vaccine:

- i. All vaccine providers who receive J&J vaccine **shall**:
  - 1. Comply with the FDA emergency use authorization conditions and recommendations;
  - 2. Develop internal use and administration guidelines for offering the J&J vaccine in conjunction with any other allocated vaccine as clinically appropriate and based on the availability of vaccine.
- ii. All hospital providers who receive J&J vaccine **shall**, subject to the availability of vaccine supply:
  - 1. Offer the J&J vaccine to any eligible inpatients being discharged from a hospital admission to a nursing home, assisted living program, or other post-acute care facility (such as a rehabilitation center).

**Please note:** If J&J is offered and refused upon discharge, hospitals should make an effort to make Pfizer or Moderna available to the inpatient.

2. Offer the J&J vaccine to eligible inpatient rehabilitation patients who have longer lengths of stay, but not 3-4 weeks needed for the Pfizer/Moderna second dose to be given before discharge.

- iii. Further clinical guidance can be found here:

  <a href="https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/janssen-covid-19-vaccine">https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/janssen-covid-19-vaccine</a>
- iv. J&J orders will arrive in the State no earlier than Wednesday.

### 4. CovidVax.Maryland.gov

- "All providers who administer vaccines to the general public shall submit their vaccination site details (vaccine appointment registration webpage and a phone number that directs callers to staff accepting appointment registrations) to john.watson@maryland.gov."
- All registered COVID-19 vaccine providers in ImmuNet that are offering vaccination clinics will be listed on this page.

#### 5. Second Doses

- As vaccine first doses are administered, providers should be able to estimate the number of patients that will require a second dose each week.
- Patients requiring second doses should be prioritized. Providers should manage appointments for second doses based on weekly estimates.
- To the extent possible, a provider shall schedule an individual's second dose at the time
  of the first dose at the appropriate time interval from the 1st dose. An individual does
  not need to create a new appointment on their own for the 2nd dose. This dose should
  be at the same location with the same provider. For more information, please see the
  <a href="CDC second dose information">CDC second dose information</a>.
- On a weekly basis, providers should review missed appointments or other reasons for scheduled second doses not being used. Further CDC guidance can be found <a href="here">here</a>.
  - Second doses should not be held or saved for patients who have not returned after 42 days following their first dose; providers may use only those second doses as first doses.
  - **REMINDER:** A COVID-19 vaccine provider may not use a second dose allocation as first doses for any other reason than outlined in the CDC guidance or in this Bulletin. They will not be provided with additional doses to cover any second doses used as first doses.

- In limited circumstances, an individual will need to schedule a second dose with their local health department under the following circumstances:
  - If the individual has been released from incarceration after getting their first dose;
  - If the individual with a proof of vaccination card has gotten their first dose in another state and has subsequently moved or returned to Maryland; and
  - If the individual has been discharged from a state-operated psychiatric facility.
  - The local health department shall honor these requests for second doses, to the extent permitted by their supply.
- Beginning 5/21/2021, all COVID-19 providers may use first and second dose
  allocations interchangeably. Providers are required to ensure that second dose
  appointments are scheduled and doses allocated to those appointments before new first
  dose appointments are scheduled. Any miscalculations of first and second dose
  allocations are the provider's responsibility; the state may not be able to assist with
  additional doses to make up for dose shortfalls.
- A state-operated psychiatric facility that admits an individual who has received a first dose shall, to the extent permitted by their second dose supply, provide the second vaccine dose.
- If the individual has gotten their first dose in the community and has been arrested, the local detention facility should make arrangements with their local health department to provide the second dose, to the extent permitted by the local health department's second dose supply.
- Second-dose orders will be placed on Sundays. Pfizer doses are projected to arrive the
  following Wednesday. Moderna doses are projected to arrive the following Tuesday. We
  will perform weekly supply chain tracking and delivery activities with providers to
  ensure orders are communicated and received appropriately.
- As part of our quality assurance effort, we are working to transition Pfizer to a two-week second dose order cycle to better ensure providers have the second doses they need with as much time as possible to align with the ideal 21-day vaccine delivery window. Moderna will stay at a three-week second dose order cycle, which aligns with the ideal 28-day vaccine delivery window.

### 6. Wastage/At-risk Vaccines

- To avoid missed vaccine administration opportunities, vaccine providers may follow
  the CDC updated wastage policy, found below in Appendix 4, with the understanding
  that the emphasis on reducing vaccine wastage by providers remains. Please continue
  to follow best practices to use every dose possible while minimizing the expense of
  missing an opportunity to vaccinate every eligible person when they are ready to get
  vaccinated.
  - For further guidance, please refer to the current <u>Vaccination Matters</u> <u>Order and/or Provider Guidance for Avoiding Waste of COVID-19</u>
     <u>Vaccine Doses</u> documents (subject to update).
- Providers should report all COVID-19 vaccine wastage and vaccine storage unit temperature excursions to: <a href="https://www.marylandvfc.org/covid-19-vaccine-excursion-expiration-reporting-form/">https://www.marylandvfc.org/covid-19-vaccine-excursion-expiration-reporting-form/</a>.

**NOTE:** For providers that have received Pfizer: If a provider is unable to access a sixth dose, the sixth dose must be reported as wastage as "other".

Please review the guidelines before disposing of any COVID-19 vaccine doses.

# 7. Transfer of Doses from the Original Provider

- A provider who has been allocated doses from Maryland may transfer doses to another vaccine provider. The receiving vaccine provider must have completed the CDC provider agreement and the CDC redistribution agreement.
- Providers must keep records of what doses have been transferred and must complete a
  transfer request here at:
   https://app.smartsheet.com/b/form/52e75f3d4514499cb0fd7110bd4000a7
  - The form will ask to/from, date, type (1st or 2nd) and amount.
- Both the transferring provider and the receiving provider are responsible for ensuring that their part of the transfer is executed correctly, i.e. transfer paperwork, chain of custody, storage and handling.
- Receiving providers must have the proper reporting mechanism in place and are responsible for reporting the vaccinations to ImmuNet.
- MDH will give the exact same second dose amount to the original provider, and they
  must ensure that the doses are administered to the same people and that those doses are
  reported.

# 8. Additional Local Health Department Guidance

- Each local health department shall develop and enforce a plan for minimizing wastage of at-risk vaccines for all providers and facilities located in their jurisdiction, consistent with the guidance in Section 6 above (an "anti-wastage plan") and the <u>Vaccination Matters</u> <u>Order</u>.
- Please note the updated guidance regarding first and second dose allocation interchangeable use in Section 5 (Second Dose).
  - Any miscalculation is the responsibility of the local health department and the state may not be able to assist with shortfalls.
- MDH asks that each local health department vaccinate:
  - At least one independent living facility/community a week, in partnership with its local area agency on aging until all identified facilities have completed clinics; and
  - At least one congregate living facility for people with disabilities (IDD or BH) or a DDA funded provider which serves individuals with intellectual and developmental disabilities (IDD) a week until all identified facilities have completed clinics.
  - We ask that local health departments partner with the Maryland Departments of Aging and Disabilities in order to coordinate the distribution of vaccines.

Further information will be provided as it becomes available. If you have any questions, please contact Andy Owen, MDH Public Information Officer, at <a href="mailto:andy.owen@maryland.gov">andy.owen@maryland.gov</a>.

Appendix 1 - Local Health Department Projected Allocations for Week 26 (6/7/2021), Week 27 (6/14/2021), Week 28 (6/21/2021), and Week 29 (6/28/2021). Note: All doses are a combination of Pfizer and Moderna. Changes from last week in **bold**.

LOCAL HEALTH DEPARTMENTS	WEEK 26	WEEK 27	WEEK 28	WEEK 29
Allegany County Health Department	0	700	700	700
Anne Arundel County Health Department	0	4,900	4,900	4,900
Baltimore City Health Department	0	5,040	5,040	5,040
Baltimore County Health Department	0	7,020	7,020	7,020
Calvert County Health Department	0	1,260	1,260	1,260
Caroline County Health Department	0	420	420	420
Carroll County Health Department	0	1,540	1,540	1,540
Cecil County Health Department	0	1,120	1,120	1,120
Charles County Health Department	0	1,680	1,680	1,680
Dorchester County Health Department	0	280	280	280
Frederick County Health Department/Enhanced Vaccination Site	1,170	2,340	2,340	2,340
Garrett County Health Department	0	280	280	280
Harford County Health Department	0	2,800	2,800	2,800
Howard County Health Department	0	3,080	3,080	3,080
Kent County Health Department	0	280	280	280
Montgomery County Health Department	0	9,590	9,590	9,590
Prince George's County Health Department	0	8,190	8,190	8,190
Queen Anne's County Health Department	0	560	560	560
Somerset County Health Department	0	280	280	280
St. Mary's County Health Department	590	2,340	2,340	2,340
Talbot County Health Department	0	280	280	280
Washington County Health Department	0	560	560	560
Wicomico County Health Department	0	560	560	560
Worcester County Health Department	0	140	140	140

Appendix 2 - Ordered Doses for Week 26 (6/07/2021)

HOSPITALS	Pfizer	Moderna	NOTES
Johns Hopkins Hospital System (Main, Bayview, Suburban, Howard, Kennedy Krieger)	450		300 for Sacred Heart (in coordination with VETF)
Lifebridge Health System (Sinai, Northwest, Carroll, Grace)	1,170		
UM Capital Region Hub (Prince George's, Laurel, Bowie, Charles)	-1	200	200 doses for Casa Hyattsville (in coordination with VETF)
Ascension Saint Agnes	1,170		
Atlantic General Hospital	1,170		

# Continued: Appendix 2 - Ordered Doses for Week 26 (6/07/2021)

LOCAL HEALTH DEPARTMENTS	WEEK 26 Pfizer	WEEK 26 Moderna	NOTES
Allegany County Health Department			Per LHD request
Anne Arundel County Health Department			Per LHD request
Baltimore City Health Department			Per LHD request
Baltimore County Health Department			Per LHD request
Calvert County Health Department			Per LHD request
Caroline County Health Department			Per LHD request
Carroll County Health Department			Per LHD request
Cecil County Health Department			Per LHD request
Charles County Health Department			Per LHD request
Dorchester County Health Department			Per LHD request
Frederick County Health Department/Enhanced Vaccination Site	1,170		Per LHD request
Garrett County Health Department			Per LHD request
Harford County Health Department			Per LHD request
Howard County Health Department			Per LHD request
Kent County Health Department			Per LHD request
Montgomery County Health Department			Per LHD request

Prince George's County Health Department			Per LHD request
Queen Anne's County Health Department			Per LHD request
Somerset County Health Department		-	Per LHD request
St. Mary's County Health Department	450	140	Per LHD request
Talbot County Health Department		-	Per LHD request
Washington County Health Department			Per LHD request
Wicomico County Health Department			Per LHD request
Worcester County Health Department		-	Per LHD request

# Continued: Appendix 2 - Ordered Doses for Week 26 (6/07/2021)

PHARMACY CHAINS	WEEK 26	NOTES
Giant Food/Martins (25 stores)	8,820	140 doses/store (other half used for targeted clinics to vaccinate vulnerable populations)

**Note:** All doses for Pharmacy Chains are Moderna.

Appendix 3 - Second Doses for Week 26 (6/07/2021)

HOSPITALS	Pfizer	Moderna
Johns Hopkins Hospital System (Main, Bayview, Suburban, Howard, Kennedy Krieger)	1,170*	1,400
Lifebridge Health System (Sinai, Northwest, Carroll, Grace)	2,340*	1,120
UM Capital Region Hub (Prince George's, Laurel, Bowie, Charles)	1	700*
Anne Arundel Medical Center	1	840
Meritus Medical Center	1,170	280
Frederick Health	1	280
Holy Cross Health (Holy Cross Silver Spring, Holy Cross Germantown)	2,340	1
Adventist HealthCare White Oak Medical Center		280
Doctors Community Hospital		840

Atlantic General Hospital	1,170	
Adventist HealthCare Rehabilitation		280
Greater Baltimore Medical Center		840
Adventist HealthCare Fort Washington Medical Center		280
Mercy Medical Center	1,170	

<sup>\*</sup>These doses will be used in conjunction with the Vaccine Equity Task Force

# Continued: Appendix 3 - Second Doses for Week 26 (6/07/2021)

LOCAL HEALTH DEPARTMENTS	Pfizer	Moderna
Allegany County Health Department		
Anne Arundel County Health Department		
Baltimore City Health Department		1,540
Baltimore County Health Department	4,680	
Calvert County Health Department	1,170	
Caroline County Health Department		420
Carroll County Health Department		1,540
Cecil County Health Department		560
Charles County Health Department		
Dorchester County Health Department		
Frederick County Health Department	2,340	
Garrett County Health Department		
Harford County Health Department	1,170	
Howard County Health Department	5,850	560
Kent County Health Department		
Montgomery County Health Department	8,190	1,400
Prince George's County Health Department		
Queen Anne's County Health Department		560
Somerset County Health Department		
St. Mary's County Health Department	1,170	
Talbot County Health Department		

Washington County Health Department	1,170	560
Wicomico County Health Department		
Worcester County Health Department		140

**Note:** FQHCs will have the appropriate second doses ordered to correspond to their first dose orders.

## Appendix 4: CDC Statement on Wastage (as of May 11, 2021)

## Take every opportunity to vaccinate every eligible person

- Over a hundred million people are fully vaccinated in the United States, and many more have received at least one COVID-19 vaccination.
- Our goal is to increase vaccine confidence and for everyone who wants to be vaccinated to have every opportunity to be fully vaccinated once they become eligible.
- CDC and our partners are doing everything possible to minimize the amount of vaccine that goes unused.
- Vaccine wastage may increase as the vaccine rollout continues because:
  - o more providers, including smaller provider sites, are now receiving vaccine,
  - o vial sizes for some vaccines have increased,
  - o vaccine vials may be opened without every dose being used
- To ensure providers do not miss an opportunity to vaccinate every eligible person, CDC recommends:
  - Providers follow <u>clinical best practice for vaccination as well as best practices when</u> managing inventory to maximize vaccination and minimize dose wastage.
  - Providers should not miss any opportunities to vaccinate every eligible person who
    presents at a vaccination site, even if it means puncturing a multidose vial to
    administer vaccine without having enough people available to receive each dose.
    - Consider establishing and promoting standing vaccination days or half-days to increase likelihood of larger numbers of people presenting for vaccination on the same day.
    - Vaccinate family members or friends who accompany patients to medical visits even if they are not established patients at the vaccinating practice
    - Continue outreach to employers or other community partners that have a large membership or network to arrange vaccination events.
    - As a contingency plan, vaccine providers should attempt to contact additional persons (i.e., from a waitlist or through personal contacts of persons being vaccinated) to use as many vaccine doses as possible.
    - Once punctured, multidose vials must be used within:
      - 12 hours (Moderna)
      - 6 hours (Pfizer)
      - 2 hours (J&J/Janssen)

- The more Americans who get vaccinated the fewer COVID-19 cases, hospitalizations, outbreaks, and deaths that will occur.
- CDC remains committed to helping jurisdictions and sites manage inventory and creating additional strategies to minimize vaccine wastage, including increased use of walk-in clinics.

### **Appendix 5: Priority Group Eligibility**

### A. Phase 1A (December 14, 2020):

• All licensed, registered, and certified healthcare providers; nursing home residents and staff; law enforcement, firefighters, EMS, and other first responders; correctional healthcare staff and officers; and front line judiciary staff.

# B. Phase 1B (January 18, 2021):

- All Marylanders age 75 and over
- All Marylanders of any age in assisted living, independent living, behavioral health and developmentally disabled group homes, and other congregate facilities through Part B of the Federal Long-Term Care Pharmacy Partnership Program.
- All individuals with intellectual and developmental disabilities can begin receiving vaccines as part of Phase 1B. Those who reside in congregate-living facilities will be prioritized. Direct support professionals will be able to receive vaccines in Phase 1C.
- **Education:** (K-12 teachers and support staff, childcare providers, higher education institutions)
  - Educational facilities include: licensed childcare facilities; K-12: both public school systems and nonpublic schools; and higher educational institutions.
  - Teachers, school staff, and child care workers are defined as those who work in pre-primary, primary, and secondary schools, as well as Head Start and Early Head Start programs (including teachers, staff, and bus drivers) and those who work as or for licensed child care providers, including center-based and family care providers. For more information, please see the HHS March 2, 2021 Directive.
  - Nonpublic schools may <u>not</u> be excluded from any COVID-19 vaccine provider who is administering COVID-19 vaccine to educators. Any COVID-19 vaccine provider who refuses to vaccinate nonpublic school staff while administering vaccines to public school system employees will have future vaccine allocations reduced or reallocated.
  - Each educational facility shall:

- Identify a clinical provider (e.g., hospitals, FQHCs, others) that is registered with ImmuNet for COVID-19 vaccine administration. If no provider is identified, then the local health department will be the default vaccinator of that facility through one of their general population clinics and the local health department's vaccine allocation.
- We encourage each educational facility and their clinical provider to coordinate with each local health department on their vaccine administration plan for vaccine allocations.
- An educational facility's clinical provider may submit a vaccine allocation request to the state and identify the number of staff that needs to be vaccinated.
- **Note**: Due to the limited supply of vaccine, Maryland does not anticipate significantly fulfilling any specific educational vaccine requests until a majority of Marylanders over age 65 are vaccinated.
- **Note:** Higher Education Institutional front-line workers with potential contact with students living in residence halls (congregate living), facilities maintenance, dining hall, and campus police are included in 1C.
- Each educational facility shall prioritize its faculty, staff, and students by the following:
  - (A) Faculty or staff that provide essential in-person learning (i.e. instruction that cannot be delivered remotely);
  - (B) Individuals with essential functions related to facility/campus operations;
  - (C) Individuals that require residential or on-campus housing;
  - (D) or that meet an existing priority group in Phase 1A or 1B currently.

## • Continuity of Government:

- Local elected officials should be prioritized as extra doses become available by the relevant local health departments.
- All federal law enforcement agencies should coordinate with the Maryland State Police on their needs.

- All federal non-law enforcement agencies should consider implementing their continuity of operations plans (COOP) and request the relevant doses from FEMA.
- All local government (at the county and municipal levels) agencies shall coordinate with their local health department on vaccination priorities. As extra doses become available, local health departments should vaccinate those agencies with a focus on the continuity of government operations.
- All other state agencies should follow the January 25, 2021 DBM guidance.
- Each local health department should work with the administrative judges (district and circuit) in their jurisdiction to prioritize and vaccinate judicial personnel that are non-frontline using their jurisdiction's allocated doses.

### C. Phase 1C (January 25, 2021)

- All Marylanders over 65.
- All other public safety (not in Phase 1A)
- All other healthcare (not in Phase 1A), including, but not limited to, Lab Services, Public Health, Vaccine Manufacturing, other healthcare professions
- Food and Agriculture Production
- Critical Manufacturing
- U.S. Postal Service
- Public Mass Transit
- Grocery Stores
- Veterinarians and Support Staff
- Clergy and other essential support for houses of worship
- Certain immunocompromised individuals who are currently receiving hospital-based treatment, including in hospital outpatient centers AND diagnosed with at least one of the following conditions:
  - Cancer patients who are currently in active treatment
  - End stage renal disease patients requiring hemodialysis
  - Chronic Obstructive Pulmonary Disease (COPD)

- Solid organ transplant recipients
- Sickle cell disease patients
- Diabetic patients (Type 1 and Type 2)
- Hospital-based health care providers should work with the clinics within their hospital that manage the care of these patients to vaccinate these individuals.
- Maryland will make its best efforts to ensure that every hospital will receive at least 100 doses for these immunocompromised individuals.
- Note: for more information on the groups defined in Phase 1C above, please see the <u>U.S. Department of Homeland Security's Critical Infrastructure Workers' Advisory</u> Memorandum (December 16, 2020).

### D. Phase 2A (Tuesday, March 23, 2021)

• All Marylanders 60 and older.

## E. Phase 2B (Tuesday, March 30, 2021)

- All Marylanders 16 and older with medical conditions that are at an increased risk for severe COVID-19 illness.
- Note: A list of qualifying medical conditions as defined by the CDC can be found here. Individuals may want to consult with their doctors to determine their individual risk.
- All Marylanders 16 and older with disabilities receiving Supplemental Security
  Income (SSI) or Social Security Disability Insurance (SSDI) benefits, Maryland
  Medicaid Employed Individuals with Disabilities (EID) individuals, Maryland
  Medicaid Rare and Expensive Case Management (REM) recipients; Marylanders
  receiving Temporary Disability Assistance Program (TDAP) benefits, or
  Marylanders receiving long term services and supports through the state's Medicaid
  waiver and state plan services.

## F. Phase 2C (Monday, April 12, 2021)

- All Marylanders 55 and older
- All essential workers in critical industries, including
  - Construction workers,
  - Food services.
  - Utilities.
  - o Transportation,

- o Financial services, and
- o Information Technology.
- Note: for more information on the groups defined in Phase 2C above, please see the <u>U.S. Department of Homeland Security's Critical Infrastructure Workers' Advisory Memorandum (December 16, 2020)</u>
- **G.** Phase 3 (Monday, April 12, 2021)
  - All Marylanders 16 and older.
- H. Adolescents (Thursday, May 13, 2021)
  - All Marylanders 12 and older.